PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail ' Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 JUN 1 8 2004 Alexandria, Virginia 22313-1450 (703) 746-4000 or <u>Fax</u> INSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated in the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 04/01/2004 CERTIFICATE OF MAILING Woodcock Washburn LLP I hereby certify that this Fee(s) Transmittal is being deposited 46th Floor with the United States Postal Service to Mail Stop Issue Fee on the One Liberty Place date indicated below via Express Mail Label:EL 999293390 US Philadelphia, PA 19103 (Depositor's name) Aberman 2UOPEEPPPPJ3 ·· (Signature) (Date 18,2004 CONFIRMATION NO. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 10/046,801 UNGR-1629 01/15/2002 Evan C. Unger 7636 TITLE OF INVENTION: CHARGED LIPIDS AND USES FOR THE SAME APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$300 07/01/2004 \$1330.00 \$1630.00 EXAMINER CLASS-SUBCLASS ART UNIT HARTLEY, MICHAEL G 424-009510 1616 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or |Woodcock Washburn LLP agents OR, alternatively, (2) the name of a single $\ensuremath{\mathbf{Q}}$ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer attorneys or agents. If no name is listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ImaRx Therapeutics, Inc. Tucson, Arizona individual XX corporation or other private group entity government Please check the appropriate assignee category or categories (will not be printed on the patent); 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): XX Issue Fee XX A check in the amount of the fee(s) is enclosed. XX Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached. XX Advance Order - # of Copies _ XX The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-3050 (enclose an extra copy of this form). Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. Leshie E. Aberman/Reg. No. 54,836 용용용 (Authorized Signature) (V) TE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. 00000070 10046601

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. Alexandria, Virginia 22313-1450. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMIT THIS FORM WITH FEE(S)

TUMES